POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	LW	108904	2/15/00	
O.I.P.E. CLASSIFIER		1	2-11:1	
FORMALITY REVIEW		201019	4400	
RESPONSE FORMALITY REVIEW		2006	117-100	

## **INDEX OF CLAIMS**

~	Rejected	N	Non-elected
=	Allowed	- 1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

<ul><li>— (Through nume</li><li>÷</li></ul>	ral) Canceled Restricted	A O	Appeal Objected	
Claim Date	Claim	Date	Claim	Date
Final	Final Original		Final Original	
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	53		103	
4.11	54		104	
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1444	56		106	
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12	62		112	
0 1/4	63		113	
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8 14	71		121	
22	72		122	
24	73 74		123	
25	75	++++	125	
25	76		126	
27	77		127	
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47	97		147	
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50	100		150	<del>                                     </del>
<u> </u>	1.00		1.54	<del></del>

If more than 150 claims or 10 actions staple additional sheet here